# Foundations Supporting Family Interaction

#### Iowa Code 232.107 Parent child visitation.

If a child is removed from the child's home in accordance with an order entered under this division based upon evidence indicating the presence of an illegal drug in the child's body, unless the court finds that substantial evidence exists to believe that reasonable visitation or supervised visitation would cause an imminent risk to the child's life or health, the order shall allow the child's parent reasonable visitation or supervised visitation with the child.

#### **FAMILY INTERACTION PHILOSOPHY:**

Children and parents have a right to spend time together. Family interactions should be a planned intervention central to the reunification process. Family interaction should only be restricted if there is a risk of harm to the child. The primary purpose of family interaction is to maintain the parent-child relationship and other family attachments and to reduce the sense of abandonment which children experience at placement. For parents, family interaction is the time to: enhance the parent's ability to adequately and appropriately care for and relate to the child; help the parent(s) develop appropriate parenting behaviors; and identify and resolve problems before the child returns home. Family interaction should take place in the least restrictive, most homelike setting appropriate to meet the child's needs for safety. It should minimize the harmful effects of family separation as well as nurture and enhance reunification. Frequent and developmentally appropriate family interaction benefits the child emotionally, and is the strongest indicator of family reunification and achievement of permanency. Interactions provide the opportunity for families to maintain relationships, enhance well-being, provide families with the opportunity to learn, practice and demonstrate new behaviors and patterns of interaction. Interactions should not stand alone but should be seen as an integral part of the family's case plan. Interactions should be guided by a family interaction plan that encourages progressive increase in parent's responsibility, is premised on case goals and on an assessment of family functioning and of risk to the child, (Hess & Proch, 1988, 1992). A written family interaction plan, tailored to meet the safety needs of the family will be provided to assure family interaction begins as soon as possible after removal from parental custody. Family interaction plans must never be used as a threat or form of discipline to the child or to control or punish the parent.

## **GOALS OF FAMILY INTERACTION:**

- Reduce the child's sense of abandonment and loss upon removal
- Resolve the threats of harm requiring that family interactions be monitored
- Interactions provide the opportunity for families to maintain relationships, enhance wellbeing, provide families with the opportunity to learn, practice and demonstrate new behaviors and patterns of interaction.
- Maintaining meaningful contact consistent with the development and/or special needs of the child and family that will further progress toward achieving permanency for the child
- Maintain relationships with siblings, parents, and other individuals
- Provide opportunity to assess caregiver/child relationship
- Provide opportunity to assess caregiver needs:
  - o Parent Training
  - o Community Resources/Referral
  - o Concrete Supports

# **FAMILY INTERACTION GUIDELINES:**

The first interaction should occur within 1-5 working days following out of home placement, unless otherwise restricted by the court. It is strongly recommended that interaction should be scheduled considering the attached developmental guidelines.

Interactions should occur in the least restrictive and most homelike environment that allows for natural interaction and provides for the child's safety. Generally the parental, relative, or foster family home will provide the best environment. When safety is an issue, a more secure setting will be chosen. Interactions must endeavor to involve the parents in routine activities of parenting and provide opportunities to enhance their parenting skills.

Family interaction plans will be revised as the child's and the family's situations change. Family interaction may be limited or denied only if such limitation or denial is necessary to protect the child's health, safety or welfare, i.e. parental incarceration, parental institutionalization, domestic violence, sexual abuse, termination of parental rights, etc. Department of Human Services (DHS) should develop a preliminary written family interaction plan within ten (10) calendar days after placement, or by the time of the Removal Hearing, whichever comes first. When possible, the plan should be developed with parental/custodial and child's input and other involved parties,

such as relatives and foster parents and the provider of Family, Safety, Risk and Permanency Services. The family interaction plan will address, but is not limited to, such issues as:

## (1) how arrangements will be made, including transportation;

Transportation is key for interactions to be successful. Foster parents and other relative caregivers should be encouraged to transport children at least one way. Parents and extended family member should be expected to arrange their own transportation, they may be given temporary support when necessary to ensure there is not a gap in family interaction, however this will likely be accomplished by public transportation. Children in placement may have to be transported by agency staff one or both ways to interactions.

# (2) who will be present and/or participate in the interactions;

Any person may be present during the interaction unless they are specifically not allowed by DHS and clearly identified in the family interaction plan. Generally during the initial phase of family interaction only parents, extended family and siblings would be allowed to be present.

# (3) if and how interactions are to be supervised (supervised only in order to protect children, assess interactions or teach parenting skills);

Supervised family interaction should always be established because it is in the best interest of the child. Interactions need to be supervised when there is a concern that a parent may be physically or emotionally abusive to a child during the interaction, or if the parent is known to exhibit inappropriate or unpredictable behavior, or has been known to made unrealistic or inappropriate promises to the child. Interactions need to be supervised if the child is interactioning with a known perpetrator of abuse or inappropriate or illegal behavior. Things to consider in determining if interactions should be supervised:

- The age of the child
- The severity and chronicity of the abuse
- The potential for abduction or continued abuse of the child
- The emotional reactions of the child to contact with the parent
- The progress of the parent in learning new skills or managing inappropriate behaviors, protective capacities displayed by the parent

# (4) tasks to be accomplished during interactions (appropriate to the developmental age of child and designed to facilitate natural interactions between parent and child)

(see attached developmental chart)

# (5) interaction conditions such as specific behaviors that must or must not occur;

Any indication of alcohol or drug use will terminate the interaction immediately.

If the parent is interrogating the child, threatening or harassing the child, demeaning others to the child (child, other parent, relatives, foster parents, DHS) attempts to discuss return home, charges or court issues, uses vulgar language – the interaction supervisor will remove the parent from the room, give them a verbal warning that another occurrence will end the interaction unless the child has become visibly upset in that situation the interaction will be ended. The parent should be given the opportunity to explain what information they were seeking or trying to give the child and they should be given

If a parent loses emotional control during the interaction to the point that this behavior is upsetting the child, the interaction supervisor will remove the child to a neutral location in the center, the interaction supervisor or other professional from the center will try and calm the parent down to allow them to continue the interaction. If the parent is unable to calm down the interaction will be ended.

#### (6) plan for handling emergency situations;

Any concerns about abduction should be communicated to the interaction supervisor by the DHS worker and the DHS worker should discuss these concerns that the consequences to the parents. Should a parent attempt abduction, the interaction supervisor will call 911 immediately if needed and follow up with a call to the DHS worker.

## (7) procedures for handling problems with family interaction; and

If the parent is not home or at designated interaction site, the supervisor will wait 15 minutes then take child back to the foster home or relative placement. Late arrivals: If the parent is late, consider the reason and frequency and seek ways to provide the maximum time together if is determined the lateness was unavoidable or a reasonable occurrence. If the parent does not show or call within 15 minutes the child should be returned to the foster home. If the child arrives late the parent should be provided the full time of the interaction.

# (8) times, frequency, length, and supervision of telephone calls with child.

Telephone calls should occur within 48 hours after placement and continue on a regular basis, if age appropriate and seen as supportive to the child. Supervision levels regarding calls will be determined at time of placement, and consideration will be given to age, protective concerns and court restrictions.

#### (9) How often interactions should occur

The first interaction should occur within 1-5 working days following out of home placement, unless otherwise restricted by the court.

#### PHASES OF FAMILY INTERACTION:

(adapted from Olmsted County, Minnesota, CFS Division, 2005.)

As families move through the phases of interaction they also move through a continuum from fully supervised interactions, to semi-supervised interactions, to unsupervised interactions. It is important to have a range of supervision options that can be individualized to best protect the safety of children during interactions and can be responsive to families working to reduce risk and improve their functioning.

Determining what level of monitoring an interaction requires should be based on safety assessment principles. The current DHS Safety Assessment can aide DHS staff, FSRP partners and the family team to discriminate between safety threats and risk, prioritizes utilizing supervision to control safety threats to children during interactions, and emphasize case planning and service interventions to manage and reduce ongoing risks to abuse.

The DHS Safety Assessment tool identifies immediate safety threats to children, assesses children's vulnerability to abuse, and recognizes families protective capacities to control immediate safety threats. The assessment weighs these factors to make a determination that children are: Unsafe, Conditionally Safe, or Safe. This determination can be used to suggest a corresponding level of supervision. For example:

**Unsafe** – There is an imminent safety threat the child(ren) would face without professional supervision of the visits to control the threat.

Conditionally Safe – Safety threats are identified as present in the family, but the family has developed the protective capacities to consistently control the threat to the child, and/or the child is seen to have necessary age, maturity, communication skills, and social supports to be less vulnerable to the threat.

**Safe** – There is no imminent safety threat to the child. The DHS and FSRP functional assessments may have identified areas of risk, however the children are not in an unsafe situation currently.

Using the DHS Safety Assessment is intended as a guide for decisions made during the family team process in developing the family interaction plan during each phase of interaction.

<u>Initial Phase</u>: (Generally 4-8 weeks, progress should be reviewed at this time by the family team and completion of a safety assessment prior to moving to the next phase) Family interaction is initially supervised but should occur in the most homelike setting possible. Family interaction should focus on allowing the most natural parent-child interactions such as cooking and eating a meal, reading stories, cleaning a room, playing a game, bath time, naptime or bedtime routines. The focus is on maintaining ties between the parent and child, assessing the parent's capacity to care for the child and goal planning.

**Moderate Supervision** – Cases may be supervised by a professional, relative or others as appropriate and determined by the family team meeting when developing the family interaction plan. Interactions should occur in the home of the parent or relative if appropriate. If the child is transported to the interaction they should ride with the interaction supervisor. Others besides parents present during the interaction should be approved by the team and should be agreed upon prior to the interaction.

• For example: the safety threat in the home requiring removal was presence of another criminal adult, or the result of severely unsanitary conditions...these safety threats may be controlled when interactions occur at a neutral/out-of-home site, and may not require a professional monitoring to manage the threat.

**Highly structured/strict supervision** - The child may not be removed from the presence of the person supervising the interaction, (sight and hearing). The individual supervising the interaction must be proficient in the language used at the interaction, no whispering, no notes, etc. Parent remains in the interaction room, while supervisor escorts child to the bathroom, drinking fountain, etc.

Interaction should be held in a neutral setting. Attendance during the interaction should be limited to parents, grandparents, and siblings only.

Interactions should begin with an hour and move to longer if they are assessed as not being distressful for the child, and all safety concerns are addressed.

• For example, a parent threatens to abscond with the child, a child expresses/experiences fear of revictimization, confusion/anxiety is experienced by

the child as the result of erratic behavior by the parent due to active substance use or mental illness, a violent perpetrator attempts to threaten or intimidate....in these cases, the need for professional supervision during this initial phase may be necessary as the children are both *vulnerable* and the *family's protective capacity* cannot adequately manage the threat. Involvement of other members of the team to monitor interactions should be continually assessed as the protective capacities are more thoroughly assessed.

**Therapeutic supervision:** Intensive family interaction session which combines family therapy and parent training that is both educationally and therapeutically based. This type of family interaction should be used with parents with mental illness or children who have been diagnosed with mental health issues.

<u>Central Phase</u>: (Usually occurs during the 2-6 month point in a case, progress should be reviewed at this time by the family team and completion of a safety assessment prior to moving to the next phase) Interactions are moving to semi or partially supervised, moving to overnights. Family interaction should focus on allowing the parent to learn and practice new skills and behaviors. Interactions typically occur more frequently, for longer periods, in a greater variety of settings.

**Relaxed of intermittent supervision** – A interaction supervisor may be present for part of the interaction. The interaction occurs in the parents' home, park, relative home or other location parent wishes. Child may usually ride with the parent. Any person may be present during the interaction unless they are specifically not allowed by DHS. Interactions could be of any length the supervised portion would be 1-2 hours.

For example, a parent has successfully engaged in treatment and is currently
effectively managing symptoms of depression or substance abuse. Both DHS and
FSRP acknowledge the progress and reduction in risk, but also agree that the
successful history of managing the symptoms is brief and sustaining the current
successes is key to reducing risk further

<u>Reunification Phase</u>: (progress should be reviewed at this time by the family team and completion of a safety assessment prior to reunification) Emphasis is on a smooth transition home. Interactions should provide maximum opportunities for parent-child interactions.

**Unsupervised family interaction** – The interaction supervisor is not present for the majority or any of the interaction but rather may check in with those involved in the interaction through a phone call or receive feedback after the interaction. These interactions should occur in the family home.

• For example, unsupervised interaction may be indicated when a parent with mental health or substance abuse issues is actively engaged in treatment and the parent presents a relapse plan created in partnership with their family team that includes oversight by a grandparent committed to the safety of the children.

#### LEVELS OF FAMILY INTERACTION:

#### **Intensity and Duration of Interactions**

Interactions should begin when children are well rested and move to increasingly difficult times such as bedtime. Initial interactions of short duration one to two hours allow parents to experience success. For some teenagers, a structured interaction of 30-45 minutes may be appropriate. Duration of interactions should increase to day long, overnight and weekend interactions when plans are being made to transition the child home.

*Infants and Toddlers:* Infants and toddlers benefit from frequent family interaction. At the very least interactions should be every two or three days. Close proximity to the attachment figure is the goal of attachment seeking behaviors in very young children.

*School age children*: School aged children can endure slightly longer periods of separation than infants because their need is for the caregiver to be available rather than in close physical proximity. School aged children benefit from contact two or three times per week (Bowlby, J., 1969, Kelly, J.B. & Lamb, M.E., 200). Face to face interactions can be supplemented by appropriate telephone and email contact.

**Sibling Interactions:** Siblings will be included in these interactions. If this is not possible, separate interactions will be scheduled. Siblings who are placed together are often better able to adjust to placement and be realistic about reunification. Efforts need to be made to maintain these relationships. Interactions and/or shared experiences should be arranged, shared experiences such as birthdays, holidays, recreational activities, etc. For younger child more frequent physical contact is recommended. For the older child less face to face contact may be needed but telephone contact and information interactions should occur in a regular basis.

#### **DEVELOPING A FAMILY INTERACTION PLAN:**

Carefully planned family interaction is a powerful family reunification intervention tool. Family interaction can help implement many essential family reunification goals, including maintaining the parent/child/sibling relationships, learning and practicing parenting skills, helping family members confront reality, and documenting progress towards reunification goals.

A concrete written family interaction plan is the best way to ensure consistent family interaction occurs in a way that meets the needs of the child, parent and the court. The most effective way of developing a family interaction plan is during a family team meeting. Family members should be actively involved in developing family interaction plans which increases the probability that family members understand and will comply with the plan, it also takes into account the family members' needs, resources and concerns. Involving the family in the development of the family interaction plan will ensure the family's culture and rituals are respected. Family interaction plans need to include providers and foster parents in the development of the plans to address their role in the family interaction plan and to be able to address progress and the needs of the child.

The DHS caseworker carries the primary responsibility for assuring that the family interaction plan is developed, implemented and revised as needed. Parent/child family interaction will be a high priority of worker's responsibilities. It is the worker's responsibility to collaboratively design the written family interaction plan for parents, siblings, and involved others and provide copies to all parties; supervise interactions, if necessary; inform others of their responsibilities and the potential consequences of not adhering to the family interaction plan; discuss failure to interaction with parents to determine the cause; discuss changes needed to make interactions more satisfactory and design a plan of action to correct situations when needed; provide or arrange transportation of foster child or siblings to the interaction; provide bus tokens for parents when applicable; interaction with the child privately to assess his/her feelings and wishes regarding interactions; and document required information regarding interactions into case record.

In all family interaction situations there are certain responsibilities for which a parent should be held accountable. Parents will ensure the emotional and physical safety and well-being of his or her child; provide their own transportation; call at least 24 hours in advance to cancel interactions so a child may be less likely to feel rejection or disappointment from a no-show interaction; plan developmentally appropriate activities to participate in with the child during the interactions; take the parental role during interaction with his or her child; expect and respond to direction from the interaction supervisor when interactions are supervised; and follow the pre-established guidelines and rules in the written family interaction plan.

Foster parents or other legal custodians will agree, for each child placed in her/his home, to permit and support interactions between child and the child's parents and/or siblings as recommended in the family interaction plan, both within and outside the caregiver's family home. This includes, but is not limited to, having the child ready for each contact; providing transportation or a place to interaction as agreed to in the family interaction plan; helping the child accept each separation from his parent following contact; reporting the child's reaction after contacts with his family to the caseworker; and notifying DHS of any unauthorized contacts between the child and the parent.

# **DEVELOPMENTALLY RELATED INTERACTION ACTIVITIES:**

Age (0-12 months): Children of this age are capable of forming attachments to more than one caregiver. Family interaction should occur 3-4 times per week. The quality of consistent care may be more important than who is providing it. One person should be in charge of most of the child care. Proceed slowly in introducing the child to new people

FREQUENCY OF INTERACTIONS	WHO SHOULD SUPERVISE?	DEVELOPMENTAL TASK	RELATED INTERACTION ACTIVITIES
3-4 times per week	Low to moderate risk:	Develop primary attachment	Meet basic needs
	Foster parents Relatives		Feeding, nurturing, bathing, protecting
	High risk:	Develop object permanence	Play peek-a-boo games
	Professional	Basic motor development	Help with standing, walking by holding hand, play come to me game
		Word recognition	Name objects, read to child
			Repeat name games
		Begin exploration and master environment	Encourage exploration
			Childproof home, take walks
			Play together with colorful, noisy items

Age (1-3 years): At this stage of development, the child's reliance on an adult depends on frequent contact. Family interaction should be as frequent as possible. Length of family interaction should be as long as feasible given the emotional needs of the child and the ability of the parent to manage extended periods of time. Younger children need more frequent, but perhaps less lengthy, periods of contact.

Frequency of interactions	Who should supervise?	Developmental task	Related interaction activities
At a minimum, 3-4 times per week	Low to moderate risk:  Foster parents	Develop impulse control	Make and consistently enforce rules
	Relatives	Language development	Talk together, read simple stories, play word games
	High risk:		Play let's pretend games
	Professional	Imitation, fantasy play	Encourage imitative play by doing things together, clean house
		Large motor coordination	Go to store ;Play together at a park, assist in learning to ride a tricycle, dance together to music
		Small motor coordination	Draw and color together, string beads
		Develop basic sense of time	Discuss interactions and interaction activities in terms of after lunch, before bedtime, etc.
		Identify and assert preferences Sense of self	Allow choices in foods eaten, clothes worn

Age (4-7 years): At this stage of development, the child has developed strong attachments to particular caregivers. The child's attachment is more related to knowing the parent is available rather than needing frequent contact. Face to face interactions should be supplemented by telephone calls and the parent's attendance at events occurring in the child's life. Separation can be traumatic and is unlikely to be mitigated by infrequent short interactions.

Frequency of interactions	Who should supervise?	Developmental task	Related interaction activities
2-3 times per week	Low to moderate:  Foster parent	Gender identification	Open to discuss boy-girl physical differences, be open to discuss child's perception of gender roles
Interactions should be adjusted around the child's life to incorporate school activities, sports games, medical appointments, birthdays	Relative Informal supports High risk: Professional	Continue development of conscience  Develop ability to solve problems  Learn cause-effect relationships	Make and enforce rules, discuss consequences of behavior  Encourage choices, discuss problems together  Point out cause-effect, logical consequences of actions
		Task completion and order	Plan activities with a beginning, middle, end (prepare and make meal, clean up)
		School entry/adjustment	Play simple games such as Candyland, Go Fish  Shop for school supplies, provide birth certificate, medical record for school entry, go with child to school, talk about school, attend school activities/conferences

Age (8-12 years): Older child may need less frequent family interaction to maintain their sense of connectedness to their parents. Face to face contact should be supplemented by telephone and email contact. Parents should be involved in the activities of their child's daily life whenever possible.

Frequency of interactions	Who should supervise?	Developmental task	Related interaction activities
1-2 times per week	Low to moderate risk:	Skill development	Help with homework
Interactions should be such adjusted around the child's life to incorporate school activities, sports games, medical appointments, birthdays	Foster parents Relatives Informal supports High risk: Professional	Sports, special interest	Play sports together, support of child's other interests, such as help with collections, attend school conferences and activities, work in household, yard work
		Peer group development  Development of self-awareness	Involve peers in interactions  Attend sports games  Talk with child about child's feelings
		Preparation for puberty  Answer questions openly	Discuss physical changes

Age (13-16 years): The relationship with parents becomes highly ambivalent as he/she develops autonomy from adults. Child may express no desire to see their parents and may express relief that they don't have to. Young teens may express indifference or nonchalance to family interaction, but their behavior often belies the pain they are trying to avoid. They may want to avoid family interaction to avoid fear engendered by seeing a distraught parent. Young teenagers sometimes begin to fantasize intensely about parents who have been absent form tier lives. Sometimes a structured 30-45 minute family interaction is all that is needed to be tolerated by the child.

Frequency of interactions	Who should supervise?	Developmental task	Related interaction activities
1-2 times per week	Low to moderate risk:	Cope with physical changes	Provide information regarding:
	Foster parents		Physical changes, be positive
	Relatives		about and help with personal appearance such as teaching
Interactions should incorporate	Informal supports		about shaving, hair care, make-up
the child's life to incorporate school activities, sports games, medical appointments, birthdays	High risk:	Develop abstract thinking	Plan and discuss future
	Professional	Development of relationship	Be open to discussing relationships, problems with
			friends, set clear expectations
		Become more independent	Help learn to drive, assist in finding job and handling money, support school completion and activities
		Changes in peer group	Transport to peer activities
			Include peers in interactions

Age (17-22 years): At this stage the connection with the primary caregiver is no less important but family interaction can be briefer and less frequent. They can experience protracted separation without undue feelings of loss or despair. They should be given a larger voice in family interaction.

Frequency of interactions	Who should supervise?	Developmental task	Related interaction activities
One time per week or less	Low to moderate risk:	Separation from family	Encourage independence through
Interactions should incorporate	Foster parents  Relatives  Informal supports		helping find an apartment, apply for jobs, think through choices. Tolerate mixed feelings about separation
the child's life, school activities, sports games, job, birthdays	High risk: Professional	Develop life goals	Be open to discuss options
		Rework identify	Share own experiences, both successes and mistakes
		Develop intimate relationships	Be open to discuss feelings, problems, and plans

<sup>\*</sup>adapted from Family Interactioning in Out-of-Home Care: A Guide to Practice, Peg McCartt – Hess and Katheleen Ohman Proch, Washington, D.C.: Child Welfare League of America, 1988.

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